

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REAGANATION

ADDRESS (number and street) ▼

5666 La Jolla Blvd

#302

☒ Check if different than previously reported. (ACC)

La Jolla

CA

92037

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00572164

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☒ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

01

01

2015

through

M M M /

D D D /

Y Y Y Y Y Y Y

06

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John W Morrison Jr.

Signature of Treasurer

John W Morrison Jr.

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

07

28

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REAGANATION

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	24323.64	24323.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	24323.64	24323.64
7. Total Disbursements (from Line 31)	24323.64	24323.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	24277.89	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REAGANATION

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 01 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 06 / 30 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

45.75

45.75

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

45.75

45.75

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

45.75

45.75

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

24277.89

24277.89

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

24323.64

24323.64

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

24323.64

24323.64

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	24323.64	24323.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	24323.64	24323.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24323.64	24323.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24323.64	24323.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	45.75	45.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45.75	45.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	24323.64	24323.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	24323.64	24323.64

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Mr. Ronald Reagan

Mailing Address 461 Melbourne Glen

City	State	Zip Code
Escondido	CA	92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8164.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	1	5

Transaction ID : SA11AI.4272

Amount of Each Receipt this Period

45.75

PIRYX DONATION SYSTEMS TESTING

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

45.75

TOTAL This Period (last page this line number only)..... ►

45.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 35
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Mr. Terry Reagan Allvord

Mailing Address 461 Melbourne Glen

City State Zip Code
Escondido CA 92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11733.89

Date of Receipt

01 / 01 / 2015

Transaction ID : SA13.4288

Amount of Each Receipt this Period

11733.89

LOAN TO OFFSET EXPENDITURES

Full Name (Last, First, Middle Initial)

B. Mr. Terry Reagan Allvord

Mailing Address 461 Melbourne Glen

City State Zip Code
Escondido CA 92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13733.89

Date of Receipt

04 / 09 / 2015

Transaction ID : SA13.4267

Amount of Each Receipt this Period

2000.00

LOAN TO OFFSET EXPENDITURES

Full Name (Last, First, Middle Initial)

C. Mr. Terry Reagan Allvord

Mailing Address 461 Melbourne Glen

City State Zip Code
Escondido CA 92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14158.89

Date of Receipt

05 / 11 / 2015

Transaction ID : SA13.4265

Amount of Each Receipt this Period

425.00

LOAN TO OFFSET EXPENDITURES

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14158.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 35
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Mr. Ronald Reagan

Mailing Address 461 Melbourne Glen

City State Zip Code
Escondido CA 92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

01 / 01 / 2015

Transaction ID : SA13.4283

Amount of Each Receipt this Period

5100.00

LOAN TO OFFSET EXPENDITURES

Full Name (Last, First, Middle Initial)

B. Mr. Ronald Reagan

Mailing Address 461 Melbourne Glen

City State Zip Code
Escondido CA 92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7100.00

Date of Receipt

01 / 30 / 2015

Transaction ID : SA13.4268

Amount of Each Receipt this Period

2000.00

LOAN TO OFFSET EXPENDITURES

Full Name (Last, First, Middle Initial)

C. Mr. Ronald Reagan

Mailing Address 461 Melbourne Glen

City State Zip Code
Escondido CA 92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8100.00

Date of Receipt

02 / 11 / 2015

Transaction ID : SA13.4269

Amount of Each Receipt this Period

1000.00

LOAN TO OFFSET EXPENDITURES

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Mr. Ronald Reagan

Mailing Address 461 Melbourne Glen

City

Escondido

State

CA

Zip Code

92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

8119.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2015

Transaction ID : SA13.4284

Amount of Each Receipt this Period

19.00

LOAN TO OFFSET EXPENDITURES

Full Name (Last, First, Middle Initial)

B. Mr. Ronald Reagan

Mailing Address 461 Melbourne Glen

City

Escondido

State

CA

Zip Code

92026

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIX Industries

Occupation

Director of Business Development

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10164.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA13.4270

Amount of Each Receipt this Period

2000.00

LOAN TO OFFSET EXPENDITURES

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2019.00

24277.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. A Home For Karl

Mailing Address 816 Champion Drive.

City Franklin State KY Zip Code 42134

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2015
Transaction ID : SB21B.4215

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Auto Dent

Mailing Address 21022 Laguna Canyon Road

City Laguna Beach State CA Zip Code 92651

Purpose of Disbursement
PROMOTIONAL VEHICLE/BODY WORK/REPAIRS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2015
Transaction ID : SB21B.4256

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Cox Communications

Mailing Address 1220 Cleveland Avenue M-107

City San Diego State CA Zip Code 92103

Purpose of Disbursement
LANDLINE/INTERNET/FAX SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2015
Transaction ID : SB21B.4242

Amount of Each Disbursement this Period

193.53

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2693.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Cox Communications

Mailing Address 1220 Cleveland Avenue M-107

City San Diego State CA Zip Code 92103

Purpose of Disbursement
LANDLINE/INTERNET/FAX SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 05 2015
Transaction ID : SB21B.4243

Amount of Each Disbursement this Period

150.00

B. Cox Communications

Full Name (Last, First, Middle Initial)

Mailing Address 1220 Cleveland Avenue M-107

City San Diego State CA Zip Code 92103

Purpose of Disbursement
INTERNET SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 17 2015
Transaction ID : SB21B.4194

Amount of Each Disbursement this Period

31.80

C. Cox Communications

Full Name (Last, First, Middle Initial)

Mailing Address 1220 Cleveland Avenue M-107

City San Diego State CA Zip Code 92103

Purpose of Disbursement
LANDLINE PHONE/INTERNET/FAX SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 06 2015
Transaction ID : SB21B.4217

Amount of Each Disbursement this Period

368.98

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Cox Communications

Mailing Address 1220 Cleveland Avenue M-107

City San Diego State CA Zip Code 92103

Purpose of Disbursement
LANDLINE PHONE/INTERNET/FAX SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 05 2015
Transaction ID : SB21B.4235

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Department of Motor Vehicles

Mailing Address 1706 Descanso Avenue

City San Marcos State CA Zip Code 92078

Purpose of Disbursement
DMV TAXES FOR 2009 CADILLAC CTS PROMOTIONAL VEHICLE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 08 2015
Transaction ID : SB21B.4127

Amount of Each Disbursement this Period

815.00

Full Name (Last, First, Middle Initial)

C. Department of Motor Vehicles

Mailing Address 1706 Descanso Avenue

City San Marcos State CA Zip Code 92078

Purpose of Disbursement
PROMOTIONAL VEHICLE REGISTRATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 30 2015
Transaction ID : SB21B.4191

Amount of Each Disbursement this Period

136.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1101.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REAGANATION

Age Group	Percentage
18-24	33.00
25-34	25.00
35-44	15.00
45-54	10.00
55-64	8.00
65-74	5.00
75-84	3.00
85+	1.00

162.03

162.07

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REAGANATION

A. Facebook

004

Category/
Type

State: District:

6.36

B. Fiverr

M M / D D / Y Y Y Y
03 12 2015

004

Category/
Type

State: District:

472.50

C. Gabourel



001

Category/
Type

State: District:

550.00

1028.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Go Strategic Marketing

Mailing Address 6789 City View Drive

City Hudsonville State MI Zip Code 49426

Purpose of Disbursement
SOCIAL MEDIA SERVICES (VIA PAYPAL)

004

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 12 2015
Transaction ID : SB21B.4227

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Go Strategic Marketing

Mailing Address 6789 City View Drive

City Hudsonville State MI Zip Code 49426

Purpose of Disbursement
SOCIAL MEDIA SERVICES (VIA PAYPAL)

004

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 12 2015
Transaction ID : SB21B.4246

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Ho Hum Media

Mailing Address 2975 Merriman Road

City Medford State OR Zip Code 97501-1266

Purpose of Disbursement
WABC RADIO AIRTIME

004

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 06 2015
Transaction ID : SB21B.4249

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2850.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Jiffy Lube

Mailing Address 6696 Miramar Road

City San Diego State CA Zip Code 92121

Purpose of Disbursement
OIL CHANGE

002

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2015
Transaction ID : SB21B.4108

Amount of Each Disbursement this Period

106.81

Full Name (Last, First, Middle Initial)

B. LegalZoomMailing Address 101 North Brand Boulevard
11th Floor

City Glendale State CA Zip Code 91203

Purpose of Disbursement
LEGAL DOCUMENT PREPARATION

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 02 / 2015
Transaction ID : SB21B.4144

Amount of Each Disbursement this Period

427.10

Full Name (Last, First, Middle Initial)

C. LegalZoomMailing Address 101 North Brand Boulevard
11th Floor

City Glendale State CA Zip Code 91203

Purpose of Disbursement
LEGAL DOCUMENT MAINTENANCE

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015
Transaction ID : SB21B.4184

Amount of Each Disbursement this Period

14.99

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

548.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. LegalZoomMailing Address 101 North Brand Boulevard
11th Floor

City Glendale State CA Zip Code 91203

Purpose of Disbursement
LEGAL DOCUMENT MAINTENANCE

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 03 2015**Transaction ID : SB21B.4198**

Amount of Each Disbursement this Period

14.99

Full Name (Last, First, Middle Initial)

B. LegalZoomMailing Address 101 North Brand Boulevard
11th Floor

City Glendale State CA Zip Code 91203

Purpose of Disbursement
LEGAL DOCUMENT MAINTENANCE

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 30 2015**Transaction ID : SB21B.4237**

Amount of Each Disbursement this Period

14.99

Full Name (Last, First, Middle Initial)

C. Mascot BooksMailing Address 560 Herndon Parkway
#120

City Herndon State VA Zip Code 20170

Purpose of Disbursement
BOOK EDITS

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 01 2015**Transaction ID : SB21B.4228**

Amount of Each Disbursement this Period

225.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Massick MediaMailing Address 166 Avenida Serra
#F

City San Clemente State CA Zip Code 92672

Purpose of Disbursement
WEB DESIGN

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 08 2015**Transaction ID : SB21B.4123**

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Massick MediaMailing Address 166 Avenida Serra
#F

City San Clemente State CA Zip Code 92672

Purpose of Disbursement
REAGANATION WEBSITE DESIGN

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 09 2015**Transaction ID : SB21B.4153**

Amount of Each Disbursement this Period

1300.00

Full Name (Last, First, Middle Initial)

C. Miller-Britton Films, LLC

Mailing Address 9707 Shelby Place

City Frisco State TX Zip Code 75035

Purpose of Disbursement
REAGANATION VIDEO INTRO

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 19 2015**Transaction ID : SB21B.4134**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2900.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Miller-Britton Films, LLC

Mailing Address 9707 Shelby Place

City Frisco State TX Zip Code 75035

Purpose of Disbursement
REAGANATION SUPPORT FILM

004

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 17 2015
Transaction ID : SB21B.4115

Amount of Each Disbursement this Period

850.00

Full Name (Last, First, Middle Initial)

B. PSPrint

Mailing Address 2861 Mandela Parkway

City Oakland State CA Zip Code 94608

Purpose of Disbursement
BUMPER STICKERS

004

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 24 2015
Transaction ID : SB21B.4100

Amount of Each Disbursement this Period

203.00

Full Name (Last, First, Middle Initial)

C. Republican Party of San DiegoMailing Address 16935 West Bernardo Drive
#208

City San Diego State CA Zip Code 92127

Purpose of Disbursement
DONATION

012

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 06 2015
Transaction ID : SB21B.4220

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1553.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Select MailingMailing Address 5630 Kearny Mesa Road
#B

City San Diego State CA Zip Code 92111

Purpose of Disbursement
DIRECT MAILING SERVICES/POSTCARD #1

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 29 / 2015**Transaction ID : SB21B.4251**

Amount of Each Disbursement this Period

414.00

Full Name (Last, First, Middle Initial)

B. Select MailingMailing Address 5630 Kearny Mesa Road
#B

City San Diego State CA Zip Code 92111

Purpose of Disbursement
DIRECT MAILING SERVICES/POSTCARD #2

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 04 / 2015**Transaction ID : SB21B.4252**

Amount of Each Disbursement this Period

497.50

Full Name (Last, First, Middle Initial)

C. Select MailingMailing Address 5630 Kearny Mesa Road
#B

City San Diego State CA Zip Code 92111

Purpose of Disbursement
DIRECT MAILING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 16 / 2015**Transaction ID : SB21B.4162**

Amount of Each Disbursement this Period

1069.71

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1981.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Select MailingMailing Address 5630 Kearny Mesa Road
#B

City San Diego State CA Zip Code 92111

Purpose of Disbursement
DIRECT MAILING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 22 2015**Transaction ID : SB21B.4164**

Amount of Each Disbursement this Period

1135.32

Full Name (Last, First, Middle Initial)

B. The Favored Assistant

Mailing Address 10 Plummer Street

City Lisbon Falls State ME Zip Code 04252

Purpose of Disbursement
EXECUTIVE ASSISTANT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 08 2015**Transaction ID : SB21B.4125**

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. The Favored Assistant

Mailing Address 10 Plummer Street

City Lisbon Falls State ME Zip Code 04252

Purpose of Disbursement
EXECUTIVE ASSISTANT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 05 2015**Transaction ID : SB21B.4149**

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2035.32

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REAGANATION

A. The Favored Assistant

Three 7-segment displays are shown, each with a different number. The first display shows '03', the second shows '05', and the third shows '2015'. Each display has a small 'M' or 'D' or 'Y' label above it, indicating the unit (Month, Day, Year).

00:

300.00

Category/
Type

M M / D D / Y Y Y Y
03 10 2015

B. U.S. Military All-Stars

01:

2000.00

Category/
Type

C. Verizon Wireless

00-

213.87

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

2513.87

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 35

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 1346A West Valley Parkway

City Escondido State CA Zip Code 92029

Purpose of Disbursement
MOBILE PHONE SERVICES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015
Transaction ID : SB21B.4201

Amount of Each Disbursement this Period

230.72

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address 1346A West Valley Parkway

City Escondido State CA Zip Code 92029

Purpose of Disbursement
MOBILE PHONE SERVICES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2015
Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

172.72

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address 1346A West Valley Parkway

City Escondido State CA Zip Code 92029

Purpose of Disbursement
MOBILE PHONE SERVICES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2015
Transaction ID : SB21B.4212

Amount of Each Disbursement this Period

236.04

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

639.48

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REAGANATION

A. Verizon Wireless

00:

203.04

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Vons

MM / DD / YYYY

00:

36.35

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Full Name (Last, First, Middle Initial)

C. Vons

002

40.76

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

280.15

[illegible]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REAGANATION

A. Vons

Date of Disbursement

Transaction ID : SB21B.4177

002

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Satisfaction Level	Percentage
Very satisfied	45.99
Not very satisfied	54.01

B. Vons

Date of Disbursement

03 / 26 / 2015

Transaction ID : SB21B.4178

002

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

C. Wells Fargo Bank

Date of Disbursement

Transaction ID : SB21B.4161

001

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	100%
25-34	100%
35-44	100%
45-54	100%
55-64	100%
65-74	100%
75-84	100%
85+	105.00%

200.24

FEC Schedule B (Form 3X) Rev. 02/2003

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REAGANATION

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address 145 North Escondido Boulevard

City Escondido State CA Zip Code 92025

Purpose of Disbursement
TRANSFER TO AVOID CHECKING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 02 2015**Transaction ID : SB21B.4121**

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address 145 North Escondido Boulevard

City Escondido State CA Zip Code 92025

Purpose of Disbursement
TRANSFER TO AVOID CHECKING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 04 2015**Transaction ID : SB21B.4110**

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

300.00

21947.81

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 28 OF 35

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4288

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Terry Reagan Allvord

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

11733.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

11733.89

TERMS

Date Incurred

MM / DD / YYYY
01 / 01 / 2015

Date Due

MM / DD / YYYY
2/6/2019

Interest Rate

1.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

11733.89

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 29 OF 35

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4267

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Terry Reagan Allvord

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 09 / 2015

Date Due

M M / D D / Y Y Y Y

2/6/2019

Interest Rate

1.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 35

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4265

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Terry Reagan Allvord

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

425.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

425.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 11 / 2015

Date Due

M M / D D / Y Y Y Y

2/6/2019

Interest Rate

1.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

425.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4283

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Ronald Reagan

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

5100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5100.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 01 / 2015

Date Due

M M / D D / Y Y Y Y

2/6/2019

Interest Rate

1.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5100.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4268

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Ronald Reagan

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 30 / 2015

Date Due

M M / D D / Y Y Y Y

2/6/2019

Interest Rate

1.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 35

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4269

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Ronald Reagan

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

MM / DD / YYYY
02 / 11 / 2015

Date Due

MM / DD / YYYY
2/6/2019

Interest Rate

1.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 34 OF 35

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4284

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Ronald Reagan

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

19.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

19.00

TERMS

Date Incurred

MM / DD / YYYY
02 / 17 / 2015

Date Due

MM / DD / YYYY
2/6/2019

Interest Rate

1.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

19.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 35

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4270

REAGANATION**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mr. Ronald Reagan

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 461 Melbourne Glen

City Escondido

State CA

ZIP Code 92026

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

MM / DD / YYYY
02 / 19 / 2015

Date Due

MM / DD / YYYY
2/6/2019

Interest Rate

1.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

TOTALS This Period (last page in this line only)..... ►

24277.89

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.